| (ACTIVE INGREDIENT)   | ADDITIONAL INDICATION   |  |   | MARKETING<br>AUTHORIZATION HOLDER   |
|---|---|--|---|---|
| (ACTIVE INGREDIENT)  1.1 PARIET TABLET 10MG  1.2 PARIET TABLET 20MG  [Rabeprazole sodium] | <ul> <li>➤ Indication:</li> <li>Helicobacter pylori Eradication to Reduce the Risk of Duodenal Ulcer Recurrence in Adults         Pariet® in combination with amoxicillin and clarithromycin as a three drug regimen, is indicated for the treatment of patients with H. pylori infection and duodenal ulcer disease (active or history within the past 5 years) to eradicate H. pylori. Eradication of H. pylori has been shown to reduce the risk of duodenal ulcer recurrence.</li> <li>In patients who fail therapy, susceptibility testing should be done. If resistance to clarithromycin is demonstrated or susceptibility testing is not possible, alternative antimicrobial therapy should be instituted.</li> <li>➤ Posology:         <ul> <li>Helicobacter pylori Eradication to Reduce the Risk of Duodenal ulcer Recurrence in Adults</li> <li>THREE DRUG REGIMEN®</li> </ul> </li> <li>PARIET 20mg Twice Daily for 7 Days         <ul> <li>Amoxicillin 1000mg Twice Daily for 7 Days</li> <li>Clarithromycin 500mg Twice Daily for 7 Days</li> </ul> </li> <li>All three medications should be taken twice daily with the morning and evening meals.</li> <li>a It is important that patients comply with the full 7-day</li> </ul> |  |   | EISAI (MALAYSIA) SDN BHD Lot 6.1, 6th.Floor Menara Lien Hoe No. 8, Persiaran Tropicana 47410 Petaling Jaya, Selangor  |
|   |   |  |   |   |
|   |   |  |   |   |
|   |   | [Rabeprazole sodium]  Duodenal Ulcer Repariet® in combina a three drug regpatients with H. p. (active or history pylori. Eradication risk of duodenal ulcer Resistant susceptibility testing therapy should be  Posology:  Helicobacter pylot Duodenal ulcer Resistant Res | [Rabeprazole sodium]  Duodenal Ulcer Recurrence in Pariet® in combination with ama a three drug regimen, is indepatients with In pylori infection (active or history within the pylori. Eradication of H. pylori risk of duodenal ulcer recurrence. In patients who fail therapy, steed done. If resistance to clarith susceptibility testing is not post therapy should be instituted.  Posology:  Helicobacter pylori Eradication Duodenal ulcer Recurrence in ATHREE DRUG REGIMEN®  PARIET 20mg  Amoxicillin 1000mg  Clarithromycin 500mg  All three medications should the morning and evening meals.  But is important that patients color | [Rabeprazole sodium]  Duodenal Ulcer Recurrence in Adults Pariet® in combination with amoxicillin and clarithromycin as a three drug regimen, is indicated for the treatment of patients with H. pylori infection and duodenal ulcer disease (active or history within the past 5 years) to eradicate H. pylori. Eradication of H. pylori has been shown to reduce the risk of duodenal ulcer recurrence.  In patients who fail therapy, susceptibility testing should be done. If resistance to clarithromycin is demonstrated or susceptibility testing is not possible, alternative antimicrobial therapy should be instituted.  Posology:  Helicobacter pylori Eradication to Reduce the Risk of Duodenal ulcer Recurrence in Adults  THREE DRUG REGIMEN **  PARIET 20mg Twice Daily for 7 Days Amoxicillin 1000mg Twice Daily for 7 Days Clarithromycin 500mg Twice Daily for 7 Days  All three medications should be taken twice daily with the morning and evening meals.  **It is important that patients comply with the full 7-day* |

## 2. 2.1 EYLEA 40MG/ML SOLUTION FOR INJECTION IN VIAL

# 2.1 EYLEA 40MG/ML SOLUTION FOR INJECTION IN PREFILLED SYRINGE

[Aflibercept 40mg/mL]

#### ➤ Indication:

Visual impairment due to diabetic macular edema (DME)

### ➤ Posology:

Diabetic macular edema (DME):

The recommended dose for Eylea is 2mg aflibercept (equivalent to 50 microliters) administered by intravitreal injection monthly for the first 5 consecutive doses, followed by one injection every 2 months. There is no requirement for monitoring between injections.

After the first 12 months of treatment with Eylea, the treatment interval may be extended based on visual and anatomic outcomes. The schedule for monitoring should be determined by the treating physician.

If visual and autonomic outcomes indicate that the patient is not benefiting from continued treatment, Eylea should be discontinued.

### BAYER CO. (MALAYSIA) SDN. BHD.

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